



Agency of Human Services Strategic Plan

Plan Period: 2011-2015

Public Version: May 30, 2014

Table of Contents

Message from Secretary Racine.....	3
Agency Overview.....	4
Agency Strategic Planning Process.....	6
Agency Mission, Vision, Values.....	7
Statutory Environment.....	9
Agency-Wide Goals for the Planning Period, Related to Statewide Priorities	10
Appendix A: Agency Statutory Authority/Relevant Rules & Regulations	17
Appendix B: Synopsis of Individual Departmental Planning	18

Message from Secretary Douglas A. Racine

The core purpose of the Agency of Human Services can be stated simply: we exist to help every Vermonter who needs help, we strive to protect our most vulnerable citizens, and we hope to assist every individual to develop to their fullest potential. The work involved in achieving that core purpose is not as simple or as easy to define.

Across the state of Vermont, from our central office to our twelve district offices, over 3,500 AHS staff work every day to address the issues of poverty, child welfare and protection, mental health, disability, aging with dignity, access to health care, better health and the safety and security of all Vermonters. We build and sustain the safety nets for Vermonters in need and work with individuals, providers and communities to build self-sufficiency, stability and prosperity for those we support.

As Secretary, I want to enhance our focus on prevention and on addressing the root causes of the issues we see. Incarceration, homelessness, substance abuse, the abuse of vulnerable populations all have their roots in poverty and the stress that many of our children and families face. I want to see us strengthen our safety net at the same time that we strengthen communities and support the development of systems that support people to take care of themselves and each other.

AHS operates in support of Governor Shumlin's overall agenda for the state and his seven statewide priorities. Additionally, our mission and the work of our six Departments is targeted to achieve results in four strategic areas:

- The reduction of the lasting impacts of poverty
- Promotion of the health, well being and safety of our communities
- Enhancement of program effectiveness and accountability
- Reform of our health system

Crucial to our success in achieving these strategic ends is our support for the continued growth and development of our state workforce and our ongoing relationship with community partners across the state. Our systems operate through the dedication, commitment and innovation of these individuals and organizations and it is critical that we continue to fully support and engage both our staff and our partners in a strategic, human services vision for the State.

The Agency of Human Services truly is all about Vermonters caring for Vermonters.

Douglas A. Racine, Secretary

Agency Overview

The Agency of Human Services (AHS) was created by the Vermont Legislature in 1969 to serve as the umbrella organization for all human service activities within state government. The Agency is currently led by Secretary Douglas Racine, appointed by the Governor in January of 2011. The Secretary's Office is responsible for strategically leading the agency and its departments in establishing and implementing agency-wide and government wide policies and practices.

The scope of the AHS is profound. Through its six member Departments and a network of community partners and providers, it is responsible for the implementation and delivery of all human service programs within the state. Each Department has a distinct area of focus and responsibility and contributes to the creation and sustenance of an entire system of human service supports. As a single entity, the Agency builds a continuum of care that protects and supports vulnerable Vermonters, addresses individual, family and regional crises as they arise, develops and promotes whole population approaches to physical and behavioral health, works to build economic self sufficiency and keeps Vermont communities safe.

The Agencies' six member Departments include the:

Department for Children and Families (DCF): 981 staff positions; an operating budget of approximately \$340 million dollars, serving 185,000 Vermonters.

Department of Corrections (DOC): 1049 staff positions; an operating budget of approximately \$140 million dollars; serving 9140 clients in community and 2124 inmates in facilities

Vermont Department of Health (VDH): 476 staff positions at VDH; an operating budget of approximately \$113 million; serving all Vermonters

Department for Disabilities, Aging and Independent Living (DAIL): 284 staff positions; an operating budget of approximately \$213 million; serving 89, 574 Vermonters

Department of Vermont Health Access (DVHA): 120 staff positions; operating budget of approximately \$1 billion dollars; serving 184,183 Vermonters

Department of Mental Health (DMH): 277 staff positions; operating budget of approximately \$154 million; serving **25,192** Vermonters

AHS services are delivered throughout the state of Vermont by a dedicated cadre of state staff and through an extensive network of community partners and private, non-profit agencies. Among this network are the designated and specialized service agencies dedicated to providing mental health and disability services to both children and adults, specialized substance use treatment facilities, parent and child centers, community action agencies, area agencies on aging,

schools and private residential facilities. Additionally, private providers, doctors, specialists and therapists offer fee-for-service supports to Vermonters across the state.

The Department of Mental Health, the Department for Disabilities, Aging and Independent Living and the Department for Vermont Health Access all operate almost exclusively within that community partner framework, relying on those private entities for service delivery to their constituent population. Conversely, although they may intersect with the private provider system, the Department for Children and Families, Vermont Department of Health and Department of Corrections are primarily responsible for the delivery of services and maintain a district office presence in all twelve AHS district offices.

Agency Strategic Planning Process

The Agency of Human Services Strategic Plan was developed through a collaborative process with each of our six Departments, building on their independent planning processes and using their Departmental plans to inform and shape the overall strategic direction for the Agency.

Each individual Department engaged in an independent planning process, engaging both internal and external stakeholders. A synopsis of those processes is included as Appendix B. Through the stakeholder and staff input gathered through the Departmental processes, the AHS plan reflects a comprehensive set of strategic directions.

In addition to the work done by the Departments, an Agency-wide strategic planning session was conducted in late summer, facilitated by staff from the Department of Human Resources. Using the Governor's statewide priorities as a framework, individual Departments assessed their mission for consistency with those priorities and identified strategic goals which supported the statewide agenda.

Throughout the summer, Secretary Racine met with each of the leadership teams for all six Departments. In these independent strategic visioning meetings he asked Departments to identify their vision for the future and concurrently to identify the barriers that presented obstacles to that vision. Using that information, his vision for human services in Vermont and the statewide priorities set forth by the Governor, he set the four primary AHS goals.

Strategies to achieve each goal were established and action steps that supported each strategy were selected from the six Departmental plans, creating a consistent strategic direction and a tangible blueprint for achievement of each goal.

A draft of the goals, strategies and action steps was reviewed with staff from the Secretary's Office and with Commissioners and their staff at a whole Agency planning meeting on November 18th. During that process, the four strategic goals were refined, strategies were assessed for consistency and actions steps were clarified and revised. Ultimately, the richest conversation centered on the identification of performance measures for each of the four goals. The result is an AHS strategic plan with clear measures of success and specific actions for attaining results.

Agency Mission

The Agency of Human Services strives to improve the health and well being of Vermonters today and tomorrow and to protect those among us who are unable to protect themselves.

Agency Vision

- The reduction of the impacts of poverty in our state and the creation of pathways out of poverty
- The promotion of health, well-being and safety in our communities
- An enhanced focus on accountability and effectiveness in achieving our goals
- The assurance of high quality health care for all Vermonters

Agency Values

In 1998, the Vermont legislature codified into law ten outcomes of well being to guide the work of state and community partners across human services and education (3 V.S.A. §3026). These outcomes direct the work of the Agency as a specific articulation of the conditions we hope to create for all Vermonters through the delivery of a robust human services system. Act 68 (the Challenges Bill) of the 2009-2010 legislative session added two additional outcomes.

- 1: Families, Youth and Individuals are engaged in their community's decisions and activities
- 2: Pregnant women and young children thrive
- 3: Children are ready for school
- 4: Children succeed in school
- 5: Children live in stable, supported families
- 6: Youth choose healthy behaviors
- 7: Youth successfully transition to adulthood

8: Adults lead healthy and productive lives

9: Elders and people with disabilities live with dignity and independence in settings they prefer

10: Communities provide safety and support to families and individuals

11: Vermonters receive affordable and appropriate health care at the appropriate time, and health care costs are contained over time

12: Families and individuals move out of poverty through education and advancement in employment

Statutory Environment

The Agency of Human Services was formed by the General Assembly in *Title 3, Chapter 53; V.S.A. § 3002: Creation of Agency*. Authority for each of its member departments is defined in Title 33, Human Services.

The Agency exists, in its current configuration, as a single entity dedicated to the provision of human service supports across the state of Vermont. Although many services are delivered in partnership with community partners and provider networks, the individual Departments and thereby the Agency as a whole are statutorily responsible for: child welfare and protection, the protection of vulnerable populations, public safety, public health, public benefits, mental health and administration of Vermont's public insurance system.

The Secretary of the Agency of Human Services is responsible for overseeing the implementation and delivery of all human services programs across the state. In conjunction with the Deputy Secretary and the Commissioners for each of the six Departments, the Secretary is responsible for the social, economic, health and welfare of all Vermonters with a special responsibility for the safety and well being of our most vulnerable citizens. Acting as an agent of the Governor, the Secretary leads the development of human service policy and practice and is responsible for all fiscal considerations related to the budget of the Agency.

Agency-Wide Goals for the planning period, related to Statewide Priorities

Before reviewing the goals, performance measures and strategies identified by the Agency of Human Services, it is important to understand some of the most significant challenges facing the Agency and the human services system across Vermont.

We continue to see the significant impacts of a weak economy and growing income inequality. From a human service perspective, this translates to: disparities in health, educational achievement, and job retention; housing instability; mental health issues; substance abuse; and rates of incarceration. The caseloads in most departments of the Agency continue to increase steadily and the complexity and severity of the issues facing Vermonters continues to intensify.

The impact of a weak economy on human service system resources is also a profound issue. In addition to financial constraints in programmatic spending, the entire Vermont system has been impacted by a 15% downsizing in AHS staffing. The damage created by this is most evident as we work to manage performance, increase quality and create accountability and transparency in state government.

Finally, an ongoing challenge for us as representatives of the human services system is to ensure that we are inclusive in our language, our planning and our implementation. To that end, as an Agency we have agreed that when we talk about health, we are being inclusive of traditional physical health, mental health, and health in the arena of substance use. When we use the term communities, we acknowledge that they encompass all ages, from the very young to our older Vermonters, and all abilities and levels of need, from those individuals and families seeking services from the Agency to all those Vermonters who do not have current needs.

Our AHS scope is broad, our impact is profound and we welcome the opportunity to articulate a set of strategic directions for the next four years.

Statewide Priority

Strong Families, Safe Communities

Goal 1: Decrease the Lasting Impacts of Poverty on Individuals, Children and Families in Vermont and Create Pathways Out of Poverty

Result: All Vermonters are free from the impacts of poverty

Indicators:

- % of pre-term births (<37 weeks)
- Achievement gap between students eligible for free and reduced lunch and students not eligible for free and reduced lunch as measured on yearly statewide assessments
 - % proficient in math
 - % proficient in reading
 - % proficient in science
- 3Squares VT enrollment:
 - % of total eligible recipients
 - % of total eligible children
 - % of total eligible older adults
- AHS consumers engaged in Creative Workforce Solutions (CWS) who achieve a successful employment outcome (*90 consecutive days of competitive employment*)

Strategy A: Work with DOE and communities across the state to identify and reduce the socio-economic achievement gap in schools

Strategy B: Develop an AHS housing strategy to decrease homelessness across the state and to increase housing stability for at-risk individuals and families

Strategy C: Develop and sustain a coordinated approach to employment across the Agency for individuals being served through AHS programs

Strategy D: Reduce and eliminate health disparities due to socio-economic factors

Statewide Priority

Strong Families, Safe Communities

Goal 2: Promote the Health, Well-Being and Safety of Individuals, Families and our Communities

Result: All Vermonters are healthy and safe

Indicators:

- % of Recidivism among offenders released from prison within 3 years
- Obesity in Vermont:
 - % of childhood obesity among WIC participants (ages 2-5) in Vermont
 - % of youth who are obese (ages 12-19) in Vermont
 - % of adults (20+) who are obese
- Rate of fall related deaths among older adults (per 100,000 people)
- Rate of childhood abuse and neglect (per 1000 children)
(adult rates will be added in 2014)*
- Rate of Vermont resident suicides annually (per 100,000 people)
- # of children (0-17) and # of adults (18+) who are homeless
- % of adults' binge drinking in the past 30 days
- % of adolescents binge drinking in the past 30 days
- % of persons age 12+ who need and do not receive alcohol treatment
- % of persons age 12+ who need and do not receive treatment for illicit drug use

Strategy A: Support health promotion and prevention for all Vermonters

Strategy B: Target existing and available resources to prevention and early intervention programs for at-risk populations

Strategy C: Focus on the identification and reduction of high risk behaviors

Strategy D: Ensure child welfare and safety through support of practices and programs which build protective factors for our highest needs children and families

Strategy E: Support partnerships in communities which target the development of community assets and capacity building

Statewide Priority

State Government and Employees

Goal 3: Enhance AHS's focus on program effectiveness, accountability for outcomes, and workforce development and engagement

Result: AHS programs are effective, accountable and develop staff

Indicators:

- % of AHS supervisors and managers who are aware of performance data management processes
- % of AHS supervisors and managers who use performance outcomes and data in decision making
- # of contracts that should be performance based that have performance standards upon initial review
- % of AHS staff who receive an annual performance evaluation
- % of supervisors and managers who report using performance management conversations (incl. performance evaluations) as a tool for coaching
- % of AHS departments that have an active Scorecard for performance accountability

Strategy A: Develop a structured Performance Management System for the Agency which will support our work and the work of our community partners

Strategy B: Create a workforce and organizational development plan which promotes a continuous improvement environment

Strategy C: Implement a Service Oriented Architecture (SOA) with core components to connect new and old information technology systems to create a holistic view of the clients that we serve.

Statewide Priority

Affordable Health Care

Goal 4: All Vermonters Have Access to High Quality Health Care

Result: All Vermonters have access to high quality health care

Indicators:

- % of eligible Vermonters enrolled in Medicaid (Medicaid, VHAP and Dr D/SCHIP)
- % of Vermonters with access to patient-centered medical homes and community health teams
- % of Vermonters receiving recommended and effective preventative health services
- % of adults (18 and older) using dental system annually

Strategy A: Develop a government sponsored system to guarantee health care access for all Vermonters

Strategy B: Ensure that the health care delivered to Vermonters is of the highest quality

Strategy C: Manage the health care system to control costs

Appendix A: Agency Statutory Authority/Relevant Rules & Regulations

§ 3002. Creation of agency

(a) An agency of human services is created consisting of the following:

- (1) The department of corrections.
- (2) The department for children and families.
- (3) The department of health.
- (4) The department of disabilities, aging, and independent living.
- (5) The human services board.
- (6) The department of Vermont health access.
- (7) The department of mental health.

(b) The following units are attached to the agency for administrative support:

- (1) Vermont veterans' home.
- (2) Governor's committee on children and youth.
- (3) Interdepartmental council on aging.
- (4)-(17) [Repealed.]
- (18) Governor's committee on employment of the handicapped.
- (19) [Repealed.]
- (20) [Repealed.]

(c) Units attached to the agency for administrative support shall receive, and shall use, the services provided by the administrative services division of the agency under section 3086 of this title. (1969, No. 272 (Adj. Sess.), { 2, eff. Jan. 10, 1971; amended 1971, No. 53, { 3; 1971, No. 198 (Adj. Sess.), { 1, eff. March 31, 1972; 1973, No. 101, { 3; 1973, No. 174 (Adj. Sess.), { 3; No. 236 (Adj. Sess.), { 2; No. 258 (Adj. Sess.), { 2; No. 267 (Adj. Sess.), { 8; 1975, No. 111, { 5; 1975, No. 247 (Adj. Sess.), { 2; 1983, No. 130 (Adj. Sess.), { 2; 1989, No. 187 (Adj. Sess.), { 2; No. 219 (Adj. Sess.), { 9(a); No. 221 (Adj. Sess.), { 11; 1995, No. 174 (Adj. Sess.), { 3; 1999, No. 147 (Adj. Sess.), { 4; 2003, No. 122 (Adj. Sess.), { 106; 2005, No. 45, { 1; 2005, No. 148 (Adj. Sess.), { 54; 2007, No. 15, { 2; 2009, No. 156 (Adj. Sess.), { I.5.)

Appendix B: Synopsis of Individual Departmental Planning

Department of Disability, Aging and Independent Living (DAIL): In June, the Commissioner participated in a retreat which brought together all agencies across state government to take the Governor's vision, value and priorities and identify the points of alignment with DAIL's core mission.

In July, DAIL Division leaders and the Commissioner met with their AHS counterparts to articulate the AHS goals and to identify DAIL's key contributions to larger vision and plan.

In August, DAIL's leadership team and key staff met in a day long retreat to reflect on its priorities for the year ahead and each identified two goals for SFY12. Each Division has ongoing input from its constituents and partners throughout the year and included their critical issues in identifying the year's priorities.

The Commissioner synthesized these goals and incorporated them into a draft strategic plan that was then sent to all staff for comment. The plan was reviewed at an all DAIL staff meeting on November 16th and finalized.

Department for Children and Families (DCF): The DCF Leadership Team had a full day planning session in August which Secretary Racine attended. The team fleshed out the overview of the strategic framework. Our intent was to bring a draft strategic plan out to the district offices and community partners for their input. Tropical Storm Irene impacted our plan and we have not been able to solicit feedback as planned. The Leadership Team reconvened for another half day session in October to further refine the plan and to finalize it for submission. Our hope is to convene community meetings at the end of the year so that staff and community partners will feel invested in the strategic plan.

Department of Corrections (DOC): The Department of Corrections (DOC) Operations Team drafted the strategic plan around based on the Governor's statewide initiatives and through conversations with our partners and the many people and groups interested in the work of the DOC. The draft plan was then sent to all DOC staff for input and comment. The Vermont State Employee Association (VSEA) also offered feedback for inclusion. Comments, where appropriate, were then incorporated into the overall strategic plan and a final draft was submitted.

Department of Mental Health (DMH): In preparation for the creation of the DMH Strategic Plan, DMH staff worked with local, state and federal stakeholders to identify:

- Unmet needs for Vermonters with mental health needs;
- Strengths and areas of improvement for our current mental health system;
- Opportunities to expand and improve mental health services in Vermont;

- Current and future threats that may impair our ability to support individuals and families with mental health needs;
- Innovative and evidence-based approaches and models to providing and supporting mental health services.

Input and information was gathered from a variety of sources:

- Local and state standing committees;
- Mental Health Transformation Council;
- Designated Agency (DA) Executive Directors and Program Directors for DA Outpatient, Children's, Emergency, and Community Rehabilitation and Treatment Programs;
- Local and State System of Care Plans;
- Other Agency of Human Services Departments;
- State Legislation;
- Federal Legislation;
- Federal Directives and Planning Documents;
- Public input via the DMH Strategic Planning Website;
- DMH staff.

Department of Vermont Health Access (DVHA): The Department of Vermont Health Access' Strategic Plan is the result of the collective input from all staff and management at DVHA and is informed by the Governor's priorities and the State Health Care Strategic Plan. This plan is also guided by the Legislative Act 48 which creates Green Mountain Health Care to contain costs and to provide comprehensive, affordable, high-quality, publicly financed health care coverage for all Vermont residents. This plan is a tool to assist DVHA in improving our performance and focusing our attention on key priorities. DVHA created a core team to develop the plan using input from all staff to guide the process. The team considered the current driving forces in Vermont, and the various strengths, weaknesses and opportunities for the Department. As a result, this plan identifies what overall accomplishments the DVHA should achieve.

Vermont Department of Health (VDH): The Department of Health's Strategic Plan was informed by several national discussions including the framework for Healthy People 2020, the promotion of chronic disease integration by the Centers for Disease Control and the National Association of Chronic Disease Directors, and by the opportunities to promote healthy communities as part of the Patient Protection and Affordable Care Act. In addition, the Strategic Plan was guided by the Vermont Prevention Framework which recognizes the continuum of interventions required to improve health ranging from those directed at the individual to those aimed at changing policies and environments. Finally, the Plan was developed based on a review of health status in Vermont with the understanding that reducing health disparities for all Vermonters is key to ensuring that Vermonters are living healthy lives in healthy communities.